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**\*BIBDATASHEET\***

**CONFIRMATION NO. 9334**

Bib Data Sheet

SERIAL NUMBER 10/790,312	FILING OR 371(c) DATE 03/01/2004 RULE	CLASS 424	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 00757
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/459,382 03/31/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

**\*\* 05/19/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 5	TOTAL CLAIMS 67	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged <input type="checkbox"/> Examiner's Signature <input type="checkbox"/> Initials				

**ADDRESS**

28880

**TITLE**

Taste-masking vehicle for coated oxazolidinone particles

<b>FILING FEE RECEIVED</b> 1616	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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